

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>CHW</i>	67477	07/27/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date		
1	4	12	01
2	12	24	11
3	12	02	02
4	✓	11	
5	✓	(17)	
6	✓	03	
7	✓		
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Claim	Date		
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If more than 150 claims or 10 actions  
staple additional sheet here